



SENIOR & LONG TERM CARE DIVISION COMMUNITY SERVICES BUREAU

HOME AND COMMUNITY BASED WAIVER Policy Manual

Section: CASE MANAGEMENT SYSTEM

Subject: Service Plan Development

DEFINITION

A service plan is a written plan for services developed by the Case Management Team (CMT) and members to assess and determine the member's status and needs. The service plan also outlines the services that will be provided to the members to meet their identified needs. Refer to Appendix HCBS 899-11 for a copy of the HCBS Service Plan (DPHHS-SLTC-135). Each service plan must be completed following the instructions in 899-11.

Refer to 899-11B for the Service Plan short form for members who are enrolled for short-term temporary placement.

REQUIREMENT

An initial service plan must be developed prior to the person's enrollment. Subsequent service plans must be completed at least annually (Refer to HCBS 809-7) or when the member's condition warrants it.

CC3 Care Category service plans must be prior authorized by the RPO and Community Services Bureau. See HCBS 402 for process.

CONSULTATION

The CMT shall consult with the member and/or the member's legal guardian and conservator if applicable. The CMT may consult with the primary care provider and other representatives such as a POA, as needed. Other contacts may include family members, relatives, psychologists, medical personnel and other consultants as necessary, with the member's approval.

DISTRIBUTION

The CMT shall provide a copy of the service plan to the member or legal representative and, if applicable, to the primary care provider.